



Missouri Weekly Influenza Report

2007-2008 Season¹

Missouri is reporting “Sporadic” to the CDC for Week 15².

To view influenza maps click [here](#). Each map will give county data by placing the cursor over the county.

Table 1. Reported Laboratory cases by sub-type for the Week ending April 12, 2008 (Week 15)

Serogroups	A (non-typed)	A (H1)	A (H1N1)	A (H3)	B	A or B Untyped (rapid test)	Total
Week 15	25				63	30	118

118 cases by rapid non-culture diagnostic test have been reported for week 15.

**Table 2. Influenza Season-to-Date and 5-season Median by Influenza Type
Through Week Ending April 12, 2008 (Week 15)**

Influenza Type	2007-08 Season	5-Season Median	Percent Change from 5-Season Median
Influenza A	17,587	7,833	124.5%
Influenza B	5,565	1,015	448.3%
Influenza Unknown Or Untyped	7,393	3,266	126.4%
Total	30,545	12,637	141.7%

**Table 3. Influenza Season-to-Date and
5-season Median by Age Group
Through Week Ending April 12, 2008 (Week 15)**

Age Group	2007-08 Count	5-Season Median	Percent Change from 5-Season Median
00-<02	3,295	1,640	100.9%
02-04	3,579	1,609	122.4%
05-14	6,370	2,754	131.3%
15-24	4,000	1,302	207.2%
25-49	7,933	1,919	313.4%
50-64	2,621	598	338.3%
65+	2,747	1,276	115.3%
Total	30,545	12,637	141.7%

**Table 4. Influenza Season-to-Date and
5-season Median by Region
Through Week Ending April 12, 2008 (Week 15)**

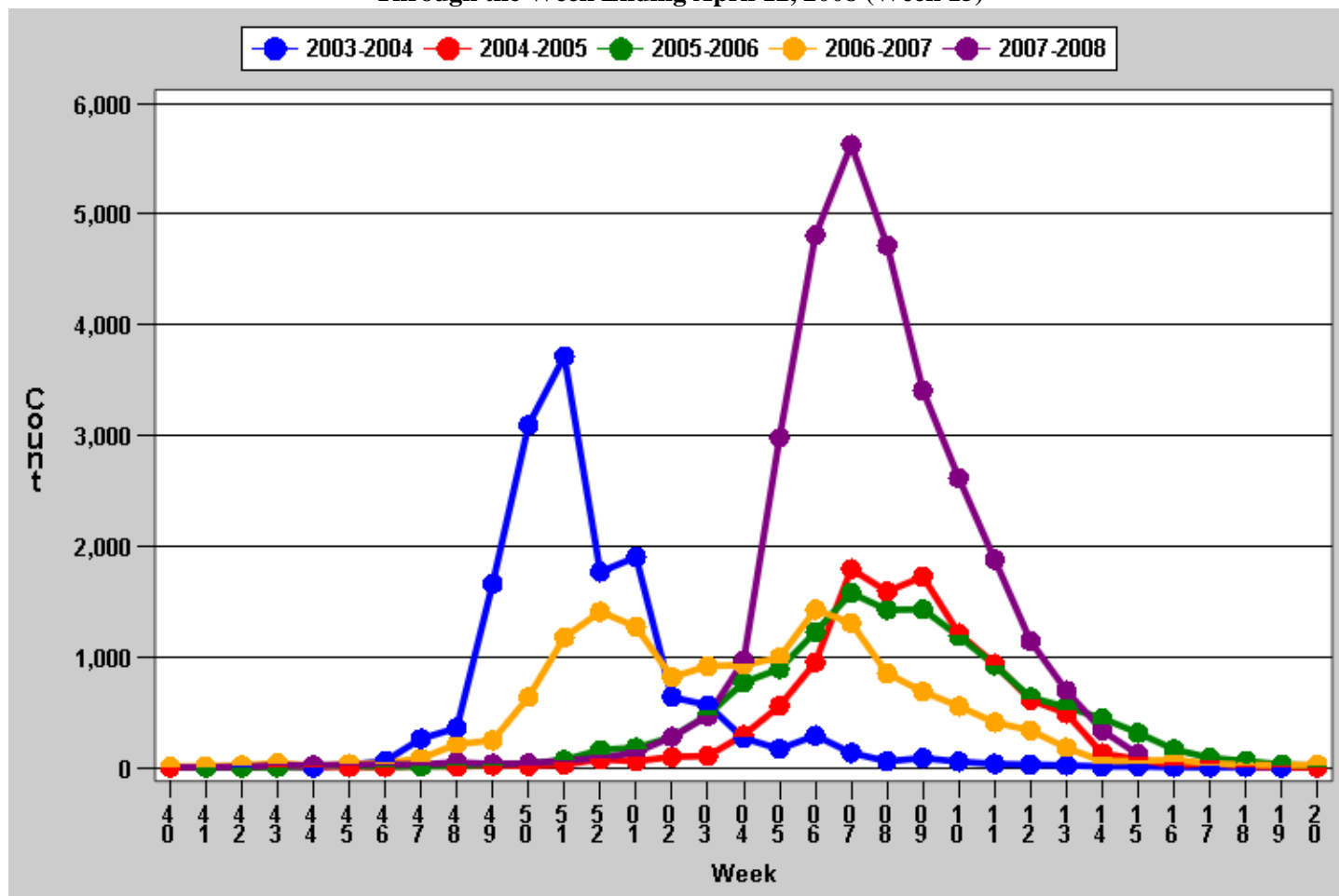
Region	2007-08 Count	5-Season Median	Percent Change from 5-Season Median
CE	5,282	1,760	200.1%
EA	9,935	4,128	140.7%
NW	8,937	3,861	131.5%
SE	2,106	686	207.0%
SW	4,285	2,017	112.4%
Total	30,545	12,637	141.7%

**Table 5. Deaths involving Pneumonia and Influenza (P&I)
Reported During the Week Ending April 5, 2008 (Week 14)***

Week 14	Season-to-Date	Week 14 Last Season	5 Year Weekly Median
112	2079	79	64

* Beginning in Week 35 of 2003, the number of P&I deaths became based on a new system of retrieval that now includes all contributing causes of death from death certificates.

**Graph 1. Influenza 2007-08 Season-To-Date as compared to the previous 4 influenza seasons
Through the Week Ending April 12, 2008 (Week 15)**



**Table 6. Respiratory Specimens Submitted to SPHL for Viral Testing
Through the Week Ending April 12, 2008 (Week 15)***

	Positive Influenza	Total Number Specimens Submitted
Week 15	0	2
Season-to-Date	92	185

*Number positives also represent past weeks specimens submitted.

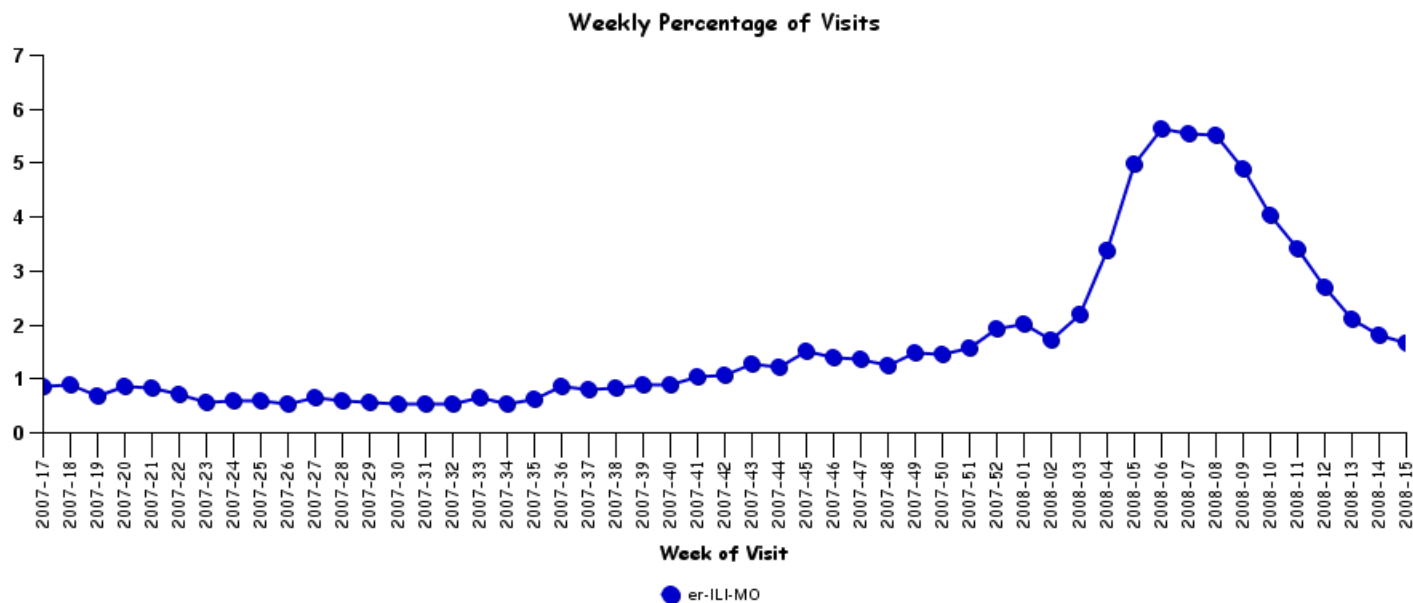
**Table 7. U.S. Influenza Sentinel Physicians Surveillance Network (USISPSN)*
Influenza-like Illness (ILI) for the Week Ending April 5, 2008 (Week 14)**

Age 0-4	Age 5-24	Age 25-64	Age 65+	Total ILI Patients Seen	Total Patients Seen	Percent ILI**
0	11	2	0	13	1026	1.26

*To learn about USISPSN, view the following website: <http://www.cdc.gov/flu/weekly/fluactivity.htm>

**This is below the regional baseline percent of 1.5%

**Graph 2. Electronic Surveillance System for the Early Notification of Community-based Epidemics (ESSENCE)*
Weekly percent of ER visits with the chief complaint of Influenza-like Illness, from participating hospitals.
Through the Week Ending April 12, 2008 (Week 15)**



*To learn more about ESSENCE, view the following website: <http://www.dhss.mo.gov/ESSENCE/>

Antigenic Characterization of Missouri Influenza Isolates submitted to CDC by the State Public Health Laboratory: CDC antigenically characterizes a sample of positive Missouri influenza isolates, submitted through the Missouri Department of Health and Senior Services (DHSS), State Public Health Laboratory (SPHL). DHSS has submitted twenty-eight influenza isolates this season to CDC for antigenic characterization.

Results Received from CDC: Influenza B viruses currently circulating can be divided into two antigenically and genetically distinct lineages represented by **B/Yamagata/16/88** and **B/Victoria/2/87** viruses.

CDC has antigenically characterized three isolates this season from Missouri: B/FLORIDA/04/2006-LIKE virus, A/WISCONSIN/67/2005-LIKE (H3N2) LOW and A/BRISBANE/10/2007-LIKE (H3N2).

Both LAIV and TIV contain strains of influenza viruses that are antigenically equivalent to the annually recommended strains: one influenza A (H3N2) virus, one influenza A (H1N1) virus, and one influenza B virus. Each year, one or more virus strains might be changed on the basis of global surveillance for influenza viruses and the emergence and spread of new strains. Only the H1N1 strain was changed for the recommended vaccine for the 2007–08 influenza season, compared with the 2006–07 season. Viruses for both types of currently licensed vaccines are grown in eggs. Both vaccines are administered annually to provide optimal protection against influenza virus infection. Both TIV and LAIV are widely available in the United States. Although both types of vaccines are expected to be effective, the vaccines differ in several aspects.

Clusters/Outbreaks of Influenza-like Illness: No school closings have been reported for week 15 of current season; No school closings were reported last season. No outbreaks have been reported for week 15 of the current season; no outbreaks were reported last season.

Data Sources: Laboratory-confirmed cases are reported to DHSS through the passive communicable disease surveillance system. Suspected influenza clusters and outbreaks are reported through the active surveillance system. Pneumonia and influenza deaths are reported through the DHSS Bureau of Vital Records. Influenza-like illness data by age category and total number of patient visits by week are reported voluntarily by participants in the U.S. Influenza Sentinel Physicians Surveillance Network.

Find Us on the Web

This report may also be found on the DHSS Internet at: www.dhss.state.mo.us/Influenza/index.html.

National influenza surveillance information is available from the Centers for Disease Control and Prevention at: www.cdc.gov/ncidod/diseases/flu/weekly.htm.

Contact Us

The Missouri Department of Health and Senior Services after hours number for reporting disease cases and emergencies is **1-800-392-0272**.

¹ *All data in this report are provisional and may change as reports are updated.*

² *Influenza activity codes are reported to CDC each Monday.*